

2N 1648

PTO/SB/21 (09-04)

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|--|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 09/214,701 | |
| | Filing Date | September 30, 1999 | |
| | First Named Inventor | Lowell, George H. | |
| | Art Unit | 1648 | |
| | Examiner Name | Jeffrey S. Parkin | |
| Total Number of Pages in This Submission | 29 | Attorney Docket Number | 021989-000210US |

| ENCLOSURES (Check all that apply) | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO/SB/08B, EP Examination Report, 1 reference, return postcard |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Request for Refund | |
| | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| | <input type="checkbox"/> Landscape Table on CD | |
| Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|------------------------------------|----------|--------|
| Firm Name | Townsend and Townsend and Crew LLP | | |
| Signature | | | |
| Printed name | Scott E. McPherson | | |
| Date | August 12, 2005 | Reg. No. | 53,307 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|--|-------------------|------|-----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Signature | | | |
| Typed or printed name | Timothy S. Parker | Date | August 12, 2005 |

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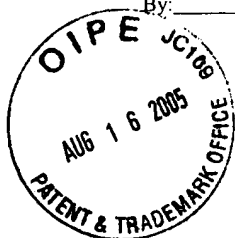
PATENT
Attorney Docket No.: 021989-000210US

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On August 12, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: Timothy S. Parker



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

George H. Lowell, et al.

Application No.: 09/214,701

Filed: September 30, 1999

For: PROTEIN AND PEPTIDE
VACCINES FOR INDUCING
MUCOSAL IMMUNITY

Examiner: Jeffrey S. Parkin

Art Unit: 1648

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

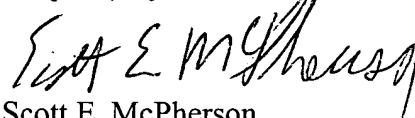
The reference cited on attached form PTO/SB/08B is being called to the attention of the Examiner. A copy of the reference is enclosed. It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of a European Examination Report dated February 28, 2005 which was issued in counterpart European application no 97933443.0, and in which this reference was cited.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

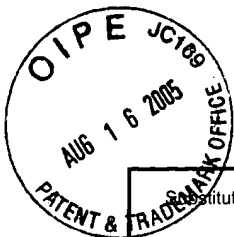
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Scott E. McPherson
Reg. No. 53,507

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Fax: 415-576-0300
SEM:tsp
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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary) | | | | Complete if Known | |
| | | | | Application Number | 09/214,701 |
| | | | | Filing Date | September 30, 1999 |
| | | | | First Named Inventor | Lowell, George H. |
| | | | | Art Unit | 1648 |
| | | | | Examiner Name | Jeffrey S. Parkin |
| Sheet | 1 | of | 1 | Attorney Docket Number | 021989-000210US |

| NON PATENT LITERATURE DOCUMENTS | | | |
|--|--------------------------|---|----------------|
| Examiner Initials * | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
| | BC | LOWELL, George H., "Proteosomes, hydrophobic anchors, ISCOMS and liposomes for improved presentation of peptide and protein vaccines" <i>New Generation Vaccines</i> (1990) p.141-160 | |
| | BD | | |
| | BE | | |
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|-----------------------|--|--------------------|--|
| Examiner Signature | | Date Considered | |
|-----------------------|--|--------------------|--|

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.